Texas Department of Public Safety-Private Security Bureau PO Box 4087, Austin, Texas 78773-0001

www.txdps.state.tx.us

ONLINE ORIGINAL INSTRUCTOR APPLICATION BACKGROUND HISTORY QUESTIONNAIRE PLEASE TYPE OR PRINT CLEARLY

Applicants Name:		Social Security Number:	
Last	First	Middle	
NOTE: Please check the appropriate boxes:		FBI Fee \$25.00 () Attached two find ppy of your signed IBT FAST	gerprint cards receipt
NOTE: If you are a Peace Officer, you are not required to submit FBI fingerprint cards; however you Officer Fingerprint Waiver along with your application. () Attached F			ou must submit form PSB-49 Peace PSB-49 Fingerprint Waiver
		question below before this application your appropriate response and answer	
(1) Have you ever been convicted, in any jurisdiction, of a felony lev		a felony level offense?	\square YES \square NO
(2) If you answered YES to (1) above, has it been LESS than 10 years since you completed your sentence or probationary period?		\square YES \square NO \square NOT APPLICABLE	
(3) Have you ever been convicted, in any	jurisdiction, of	a Class A or equivalent misdemeanor?	\square YES \square NO
(4) If you answered YES to (3) above, has sentence or probationary period?	s it been LESS t	than 5 years since you completed your	\square YES \square NO \square NOT APPLICABLE
(5) Have you, within the past 5 years, been misdemeanor or equivalent offense?	n convicted, in	any jurisdiction, of a Class B	□ YES □ NO
(6) Are you currently charged with, or unc	der indictment f	For, a felony, or a Class A misdemeanor?	☐ YES ☐ NO
(7) Are you currently charged with, a Class	ss B misdemear	nor?	□ YES □ NO
(8) Have you ever been found by a court to be incompetent by rea		nt by reason of mental defect?	☐ YES ☐ NO
(9) Have you received a dishonorable disc honorable discharge, from the Armed	_	onduct discharge, or an other than (If yes attach a copy of your DD-214).	□ YES □ NO
(10) Are you required to register as a sex	offender, in this	s state or any other state?	□ YES □ NO
(11) Federal law prohibits the Bureau from issuing a license to anyone who is ineligible to work in the U.S. Are you a non-citizen? If "yes," you must submit documentation of your federal employment authorization or a copy a copy of your permanent resident card.			□ YES □ NO
		above require the submission of the appropriate erprint search may result in denial of or revocati	
By signing below, you are acknowledging th provided in §1702.371 and Administrative Rule 35.46.	at you have reviev Rule §35.1. In addi	ved the eligibility criteria of Occupations Code § tion, you have acknowledged and reviewed the d	1702.113 and the definition of 'conviction' isqualifying offenses listed in Administrative
		formation contained in the above warning at a false entry on this document could be	
Applicant's Signature:	Applicant's Signature: Date:		
Th	is section must	be completed by the Qualified Manager or	Owner
		yment in a position that requires registrat	
	• • •	ant's Date of Employment	
I am requesting that the above applic	ant be issued a	registration with my company as my emp	ployee:
Qualified Manager or Owner signa	ture:	Date:_	
NOTICE: THIS IS A GOVERNMENTAL RE	CORD. ANY FAL	SE ENTRY MADE ON THIS DOCUMENT COUL	D BE CONSIDERED A CRIMINAL VIOLATION.

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